

# UNITED STATES DISTRICT COURT

for the

Western District of North Carolina

COMPUFILL, LLC

*Plaintiff*

v.

HARRIS TEETER, INC.

*Defendant*

Civil Action No. 3:13-cv-97

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* HARRIS TEETER, INC.  
C/O: CT Corporation System  
150 Fayetteville Street, Suite 1011  
Raleigh, NC 27601

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Susan Freya Olive  
Olive & Olive, P.A.  
500 Memorial St.  
P.O. Box 2049  
Durham, NC 27702

Darrell G. Dotson  
Stevens Love  
222 N. Fredonia St.  
Longview, Texas 75601

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT



*Frank G. Johns*  
Frank G. Johns, Clerk  
United States District Court

Date **2/15/2013**

Civil Action No. 3:13-cv-97

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Harris Teeter, Inc.  
was received by me on *(date)* 2/15/2013.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

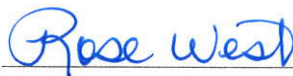
☐ I returned the summons unexecuted because \_\_\_\_\_; or

☒ Other *(specify)*: Served by certified mail, RRR # 7012 2210 0001 6242 5423 upon  
its registered agent, CT Corporation System, 150 Fayetteville  
St., Ste. 1011, Raleigh, NC 27601 on 2/25/2013.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 3/5/2013



*Server's signature*

Rose West, Legal Assistant

*Printed name and title*

222 N. Fredonia St., Longview, TX 75601

*Server's address*

Additional information regarding attempted service, etc:

7012 2210 0001 6242 5423

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL™ RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b> <i>Teeter</i>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage &	\$ <b>8.37</b>
Harris Teeter, Inc. c/o CT Corporation System 150 Fayetteville St., Ste 1011 Raleigh, NC 27601	
Sent To Street, Apt. No., or PO Box No. City, State, ZIP+4	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <b>X</b> <i>Holly Frost</i> <div style="float: right;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee         </div>	
1. Article Addressed to:  <div style="border: 1px solid black; padding: 5px; margin: 5px;">             Harris Teeter, Inc.              c/o CT Corporation System              150 Fayetteville St., Ste 1011              Raleigh, NC 27601           </div>		B. Received by (Printed Name)	C. Date of Delivery <b>2.25.13</b>
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	

7012 2210 0001 6242 5423